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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Rheannon First name  Elisa Middle name  Castrucci Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3285	

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Debtor 1 Rheannon Elisa Castrucci

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	116 North Ave Cincinnati, OH 45215	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Hamilton County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Page 3 of 46 Document Debtor 1 Rheannon Elisa Castrucci Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When District Case number, if known

#### 11. Do you rent your residence?

No.

Go to line 12.

☐ Yes.

Has your landlord obtained an eviction judgment against you?

No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

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Document Page 4 of 46 Case number (if known) Debtor 1 Rheannon Elisa Castrucci Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed? For example, do you own perishable goods, or

Number, Street, City, State & Zip Code

Where is the property?

livestock that must be fed,

or a building that needs urgent repairs?

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Debtor 1 Rheannon Elisa Castrucci

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Rheannon Elisa C	astrucci			Case numb	Der (if known)
Part	6: Answer These Quest	ions for Rep	orting Purposes			
16.	What kind of debts do you have?	16a. <b>/</b>	are your debts primarily condividual primarily for a per	consumer debts? Cons conal, family, or househ	umer debts are de	fined in 11 U.S.C. § 101(8) as "incurred by an
		[	☐ No. Go to line 16b.			
			Yes. Go to line 17.			
			are your debts primarily be			s that you incurred to obtain siness or investment.
		[	☐ No. Go to line 16c.	Ŭ	•	
		Г	Yes. Go to line 17.			
		16c. S	State the type of debts you	owe that are not consun	ner debts or busine	ess debts
		_				
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapte	er 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and		am filing under Chapter 7. re paid that funds will be a			pperty is excluded and administrative expenses s?
	administrative expenses		No			
	are paid that funds will be available for	[	☐ Yes			
	distribution to unsecured creditors?					
18.	How many Creditors do	<b>1</b> -49		□ 1,000-5,000		☐ 25,001-50,000
	you estimate that you	■ 1-49 □ 50-99		☐ 5001-10,000		□ 50,001-100,000
	owe?	☐ 100-199		10,001-25,00	00	☐ More than100,000
		200-999				
19.	How much do you	□ \$0 - \$50	,000	□ \$1,000,001 -	\$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		- \$100,000	\$10,000,001		□ \$1,000,000,001 - \$10 billion
			1 - \$500,000	□ \$50,000,001 □ \$100,000,00		☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
		□ \$500,00	1 - \$1 million	<b>—</b> \$100,000,00	1 - \$500 HillilloH	I More than \$50 billion
20.	How much do you	□ \$0 - \$50	,000	□ \$1,000,001 -	\$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		- \$100,000	□ \$10,000,001		\$1,000,000,001 - \$10 billion
		_	1 - \$500,000	\$50,000,001		□ \$10,000,000,001 - \$50 billion
		<b>□</b> \$500,00	1 - \$1 million	\$100,000,00	1 - \$500 million	☐ More than \$50 billion
Part	7: Sign Below					
For	you	I have exar	nined this petition, and I de	eclare under penalty of p	erjury that the info	rmation provided is true and correct.
						e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.
			ey represents me and I did I have obtained and read th			not an attorney to help me fill out this
		I request re	lief in accordance with the	chapter of title 11, Unite	d States Code, spo	ecified in this petition.
		bankruptcy and 3571.	case can result in fines up			or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519
			non Elisa Castrucci n Elisa Castrucci f Debtor 1		Signature of Debt	for 2
		Executed of	n <b>May 2, 2019</b>		Executed on	
			MM / DD / YYYY		M	M / DD / YYYY

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Debtor 1 Rheannon Elisa Castrucci Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Eric W. Goering	Date	May 2, 2019
Signature of Attorney for Debtor	_	MM / DD / YYYY
Eric W. Goering Printed name		
Goering & Goering		
220 West Third Street		
Cincinnati, OH 45202		
Number, Street, City, State & ZIP Code		
Contact phone (513) 621-0912	Email address	
0061146 OH		
Bar number & State		

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		Docume	ent Page 8 of 4	10	
Fill in this infor	mation to identify your	case:			
Debtor 1	Rheannon Elisa (	Castrucci			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case number (if known)					☐ Check if this is an amended filing
					_

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	160,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	21,959.0
	1c. Copy line 63, Total of all property on Schedule A/B	\$	181,959.0
•ar	t 2: Summarize Your Liabilities		
			iabilities nt you owe
<u>2</u> .	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	130,378.9
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	49,885.7
	Your total liabilities	\$	180,264.73
Par	t 3: Summarize Your Income and Expenses		
l.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,305.0
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,289.0
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
	■ Yes		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Rheannon Elisa Castrucci

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

5,465.74

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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		r case and thi	is filing	j:					
	Rheannon Elisa								
	First Name	Middle	Name	Last Name					
	First Name	Middle	Name	Last Name					
Jnited States Bankr	uptcy Court for the:	SOUTHERN	N DISTF	RICT OF OHIO					
Case number									Check if this is an amended filing
Official Forn									
Schedule	A/B: Prop	perty							12/15
	e any legal or equitab			Estate You Own or Have an Inte					
1.1 116 North Av Street address, if av	/enue ailable, or other description	on .	What	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	y	the amount	of any secure	d clair	or exemptions. Put ms on Schedule D: cured by Property.
116 North Av	ailable, or other description	on 3215-0000		Single-family home  Duplex or multi-unit building	у	Current val	of any secured tho Have Clain lue of the erty?	d clair ns Se Cui	ns on Schedule D: cured by Property. rrent value of the rtion you own?
116 North Av Street address, if av	ailable, or other description			Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property?		Current valentire prop \$16  Describe th (such as fe a life estate)	of any secured the Have Claim tue of the erty?  10,000.00  10 en ature of yellow in the simple, tense), if known.	d clair ns Se  Cui por  our o	ns on Schedule D: cured by Property.
116 North Av Street address, if av	ailable, or other description	215-0000	Who h	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other		Current valentire prop \$16  Describe th (such as fe	of any secured the Have Claim tue of the erty?  10,000.00  10 en ature of yellow in the simple, tense), if known.	d clair ns Se  Cui por  our o	rrent value of the tion you own? \$160,000.00 wnership interest

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Deb	or 1 R	theannon Elis	sa Castrucci		Case number (if known)	
3. <b>C</b> a	ırs, vans,	trucks, tracto	rs, sport utility ve	hicles, motorcycles		
П	No					
	Yes					
_	res					
3.1	Make:	Lexus		Who has an interest in the property? Check one		cured claims or exemptions. Put
3.1	Model:	CT 200		Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2012		Debtor 2 only	Current value of	
		mate mileage:	65000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other in	formation:		☐ At least one of the debtors and another		
					\$10,519	9.00 \$10,519.00
				LI Check if this is community property (see instructions)		Ψ10,013.00
	No Yes	aller velue of the	ne portion vou c	in for all of your optrice from Part 2 including	ng any ontrine for	
				n for all of your entries from Part 2, includin that number here		\$10,519.00
			al and Household Ite			
				terest in any of the following items?		Current value of the portion you own? Do not deduct secured
6 <b>H</b>	nusehold	goods and fur	nishinas			claims or exemptions.
E	xamples:			, china, kitchenware		
	No					
	Yes. De	scribe				
		Г	Stove-200			
			Refrigerator-200			
			Living Room Se	et-250		
			Dinette-250 Bedroom Set-30	00		
			2 childs bedroo			
		,	Washer & Dryer	-150		
			Tables-25			
			Lamps-25			
			Microwave-25	d (towns (seek), 450		\$1,925.00
		L	wisc. Housenoi	d Items (each)- 150		Ψ1,323.00
	No	Televisions and		eo, stereo, and digital equipment; computers, p nedia players, games	rinters, scanners; music c	ollections; electronic devices
		Γ	4TV-300			
			41V-300 2DVD-50			
			Stereo-25			
			2Computers-30	0		\$675.00

Official Form 106A/B Schedule A/B: Property page 2

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D	Rneannon	Elisa Castrucci Case number (if known)	
8.		d figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, o ions, memorabilia, collectibles	r baseball card collections;
	□ No		
	Yes. Describe		
			4400
		Misc. Pictures, cd's, books, paintings and wall hangings (any item)	\$100.00
9.	Equipment for sports a  Examples: Sports, photo musical inst  No	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes an	d kayaks; carpentry tools;
	☐ Yes. Describe		
10.	Firearms  Examples: Pistols, rifle  □ No	es, shotguns, ammunition, and related equipment	
	Yes. Describe		
			4000 00
		Ruger 9mm	\$200.00
11.	Clothes  Examples: Everyday o  No  Yes. Describe	lothes, furs, leather coats, designer wear, shoes, accessories	
		Wearing Apparel	\$200.00
		Trouting Apparor	
12.	<ul><li>Jewelry</li></ul>	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gol  Misc. Jewelry including watch, chain, earrings (any item)	d, silver \$ <b>500.0</b> 0
13.	Non-farm animals  Examples: Dogs, cats  □ No  ■ Yes. Describe	birds, horses	
		2 dogs	\$0.00
		2 4095	
14.	Any other personal a  ■ No □ Yes. Give specific ir	nd household items you did not already list, including any health aids you did not list	
15		of all of your entries from Part 3, including any entries for pages you have attached number here	\$3,600.00
D.	ort 4. Dogoribe Veur Fire		
	ort 4: Describe Your Fina	legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples: Money you	have in your wallet in your home, in a safe deposit how, and on hand when you file your petition	

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

■ No

Official Form 106A/B Schedule A/B: Property page 3

Case 1:19-bk-11658 Doc 1 Filed 05/03/19 Entered 05/03/19 13:17:36 Document Page 13 of 46 Debtor 1 Case number (if known) Rheannon Elisa Castrucci ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... **PNC Bank** \$200.00 checking 17.1. **PNC Bank** \$25.00 17.2. savings **US Bank** \$10.00 17.3. checking \$5.00 **US Bank** Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 403B **Fidelity** \$5,000.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No Institution name or individual: ☐ Yes. .....

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No ☐ Yes..... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

Case 1:19-bk-11658 Doc 1 Filed 05/03/19 Entered 05/03/19 13:17:36 Document Page 14 of 46 Case number (if known) Debtor 1 Rheannon Elisa Castrucci 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No The Yes, Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else □ No Yes. Give specific information.. **Back Child Support** \$2,600.00 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim.......

☐ Yes. Give specific information..

Official Form 106A/B

Schedule A/B: Property

page 5

35. Any financial assets you did not already list

■ No

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Rheannon Flisa Castrucci

Case number (if known)

Debtor	1 Rheannon Elisa Castrucci		Case number (if known)	
	dd the dollar value of all of your entries from Part 4, includin r Part 4. Write that number here		es you have attached	\$7,840.00
Part 5:	Describe Any Business-Related Property You Own or Have an Inter	rest In. List any real esta	ite in Part 1.	
37. <b>Do y</b>	ou own or have any legal or equitable interest in any business-relate	ed property?		
■ No	. Go to Part 6.			
☐ Ye	s. Go to line 38.			
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	et In.	
_	you own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
Ex ■ N	you have other property of any kind you did not already list amples: Season tickets, country club membership to ses. Give specific information	?		
54. <b>A</b>	dd the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. <b>P</b> a	art 1: Total real estate, line 2			\$160,000.00
56. <b>P</b> a	art 2: Total vehicles, line 5	\$10,519.00		
57. <b>P</b> a	art 3: Total personal and household items, line 15	\$3,600.00		
58. <b>P</b> a	art 4: Total financial assets, line 36	\$7,840.00		
59. <b>P</b> a	art 5: Total business-related property, line 45	\$0.00		
60. <b>P</b> a	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>P</b> a	art 7: Total other property not listed, line 54 +	\$0.00		
62. <b>T</b>	otal personal property. Add lines 56 through 61	\$21,959.00	Copy personal property to	otal <b>\$21,959.00</b>

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$181,959.00

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Fill in this inform	mation to identify your	case:		
Debtor 1	Rheannon Elisa C	Castrucci		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number _				
(if known)				Check if this is an amended filing

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Print description of the assessment and time and Comment only of the Assessment of t

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	Specific laws that allow exemption		
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
116 North Avenue Cincinnati, OH 45215 Hamilton County	\$160,000.00		\$145,425.00	Ohio Rev. Code Ann. § 2329.66(A)(1)	
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(1)	
2012 Lexus CT 200 65000 miles Line from Schedule A/B: 3.1	\$10,519.00		\$4,000.00	Ohio Rev. Code Ann. § 2329.66(A)(2)	
Line from Scriedule A/b. 3.1	С		100% of fair market value, up to any applicable statutory limit	2020.00(7)(2)	
Stove-200 Refrigerator-200	\$1,925.00		\$1,925.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Living Room Set-250 Dinette-250			100% of fair market value, up to any applicable statutory limit	2020.00(A)(4)(a)	
Bedroom Set-300 2 childs bedrooms- 350 Washer & Dryer-150					
Tables-25 Lamps-25					
Microwave-25					
Misc. Household Items (each)- 150 Line from <i>Schedule A/B</i> : 6.1					

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ebtor 1	Rheannon Elisa Castrucci			Case number (if known)	
	f description of the property and line on edule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	/-300 /D-50	\$675.00		\$675.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
2Cc	reo-25 omputers-300 from <i>Schedule A/B</i> : <b>7.1</b>			100% of fair market value, up to any applicable statutory limit	( // //
	c. Pictures, cd's, books, paintings I wall hangings (any item)	\$100.00		\$100.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
	from Schedule A/B: 8.1			100% of fair market value, up to any applicable statutory limit	
	ger 9mm from <i>Schedule A/B</i> : <b>10.1</b>	\$200.00		\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
				100% of fair market value, up to any applicable statutory limit	
	aring Apparel from Schedule A/B: 11.1	\$200.00		\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
				100% of fair market value, up to any applicable statutory limit	, , , , , , , , , , , , , , , , , , ,
	c. Jewelry including watch, chain, rings (any item)	\$500.00		\$500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
	from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	( ) ( )
	B: Fidelity	\$5,000.00		100%	Ohio Rev. Code Ann. § 2329.66(A)(10)(b)
				100% of fair market value, up to any applicable statutory limit	
	ck Child Support	\$2,600.00		100%	Ohio Rev. Code Ann. § 2329.66(A)(11)
				100% of fair market value, up to any applicable statutory limit	·
	cash and bank balances from Schedule A/B:	\$500.00		\$500.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
				100% of fair market value, up to any applicable statutory limit	( , , ,
	/ property from Schedule A/B:	\$1,325.00		\$1,325.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
				100% of fair market value, up to any applicable statutory limit	. , . ,
	you claiming a homestead exemption opject to adjustment on 4/01/22 and every 3			led on or after the date of adjustmer	nt.)
	Yes. Did you acquire the property covere ☐ No	d by the exemption wi	thin 1	,215 days before you filed this case	?
	□ No □ Yes				

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		Document	Page 1	.8 01 46		
Fill in this information	on to identify you	r case:				
Dahtand	Dhaannan Eliaa	0				
	Rheannon Elisa First Name	Middle Name	Last Name			
Debtor 2	iist ivaille	Middle Name	Last Ivame			
_	First Name	Middle Name	Last Name			
United States Bankru	uptcy Court for the:	SOUTHERN DISTRICT OF C	DHIO			
Casa numbar						
Case number					☐ Check	if this is an
(,						ed filing
					amene	cu ming
Official Form 1	06D					
	<del></del>					
Schedule D:	Creditors	Who Have Claims	Secure	ed by Property	/	12/15
		f two married people are filing toge out, number the entries, and attach				
number (if known).						
1. Do any creditors hav	e claims secured by	your property?				
□ No. Check this	s box and submit th	nis form to the court with your other	er schedules.	You have nothing else to	report on this form.	
Yes Fill in all	of the information b	nelow .				
		ociow.				
Part 1: List All Se	ecured Claims			. Column A	Column B	Column C
		nore than one secured claim, list the c		ely		
		a particular claim, list the other creditoral order according to the creditor's na		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
——		and order decorating to the orderer of he		value of collateral.	claim	If any
2.1 Guardian Sav	vings	Describe the property that secure	s the claim:	\$121,901.00	\$160,000.00	\$0.00
Creditor's Name		116 North Avenue Cincinn	ati, OH			
		45215 Hamilton County				
	_	As of the date you file, the claim is	S: Check all that			
5901 Coleraii		apply.	or or our an unat			
Cincinnati, O	OH 45239	☐ Contingent				
Number, Street, City	, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply	<b>'</b> .			
Debtor 1 only		An agreement you made (such a	s mortgage or s	secured		
Debtor 2 only		car loan)				
Debtor 1 and Debtor	r 2 only	☐ Statutory lien (such as tax lien, m	nechanic's lien)			
☐ At least one of the de	ebtors and another	☐ Judgment lien from a lawsuit				
$\square$ Check if this claim	relates to a	Other (including a right to offset)	1st Mortg	jage		
community debt		3 . 3				
Date debt was incurred	d 6/23/2016	Last 4 digits of account nu	mher			
Date dept was incurred	0/23/2010	- Last 4 digits of account had				
0.0	NI-	Barrier de la companya del companya de la companya del companya de la companya de		<b>\$0.477.05</b>	<b>640 540 00</b>	<b>to oo</b>
2.2 Huntington E	sank	Describe the property that secure	s the claim:	\$8,477.95	\$10,519.00	\$0.00
Creditor's Name		2012 Lexus 200H				
2361 Morse F	24	As of the date you file, the claim is	s: Check all that			
Columbus, O		apply.				
		Contingent				
Number, Street, City	, State & ZIP Code	Unliquidated				
Who owes the debt?	Check one	☐ Disputed  Nature of lien. Check all that apply	,			
_	OHEON OHE.	_				
Debtor 1 only		An agreement you made (such a	s mortgage or s	secured		
Debtor 2 only		car loan)				
Debtor 1 and Debtor	•	Statutory lien (such as tax lien, m	nechanic's lien)			
At least one of the de		☐ Judgment lien from a lawsuit				
☐ Check if this claim	relates to a	☐ Other (including a right to offset)				
community debt						
Date debt was incurred	d 10/25/16	Last 4 digits of account nu	mber			

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Debtor 1	Rheannon	Elisa Castrucci		Case number (if known)	
	First Name	Middle Name	Last Name		

Add the dollar value of your entries in Column A on this page. Write that number here: \$130,378.95

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$130,378.95

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

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		Document	Page 20	of 46		
Fill in thi	s information to identify your	r case:				
Debtor 1	Rheannon Elisa	Castrucci				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, f	iling) First Name	Middle Name	Last Name			
	-					
United St	tates Bankruptcy Court for the:	SOUTHERN DISTRICT OF O	НЮ			
Case nur	mber					
(if known)					☐ Check if this is an	
					amended filing	
Officia	Form 106E/F					
Sched	ule E/F: Creditors V	Who Have Unsecured	<b>Claims</b>		12/15	
Schedule ( Schedule I left. Attach	G: Executory Contracts and Unex D: Creditors Who Have Claims Se the Continuation Page to this pa case number (if known).	pired Leases (Official Form 106G). cured by Property. If more space is age. If you have no information to re	Do not include needed, copy t	any creditors with partially the Part you need, fill it out	Property (Official Form 106A/B) and secured claims that are listed in , number the entries in the boxes on top of any additional pages, write yo	the
Part 1:	List All of Your PRIORITY U					
_	y creditors have priority unsecur	red claims against you?				
	o. Go to Part 2.					
☐ Ye		ITV Unacquired Claims				
Part 2:	List All of Your NONPRIORI					—
_	y creditors have nonpriority unse					
⊔ No	o. You have nothing to report in this	part. Submit this form to the court with	n your other sche	edules.		
■ Ye	s.					
unsec	ured claim, list the creditor separate one creditor holds a particular claim,		d, identify what t	ype of claim it is. Do not list of	itor has more than one nonpriority claims already included in Part 1. If more claims fill out the Continuation Page of	)
					Total claim	
4.1	Affirm (Realreal)	Last 4 digits of ac	count number	r7si	\$690	.52
	Ionpriority Creditor's Name	When was the deb	t incurred?	2010		
_	San Francisco, CA 94104	when was the dec	n incurred?	2019		
	lumber Street City State Zip Code	As of the date you	file, the claim i	s: Check all that apply		
_	<b>Vho incurred the debt?</b> Check one					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
[	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and a	— · · ·	RITY unsecured	d claim:		
	☐ Check if this claim is for a con lebt				4b-4	
	s the claim subject to offset?	☐ Obligations arisi report as priority cla		ration agreement or divorce	tnat you did not	
	No			g plans, and other similar de	bts	
	☐Yes	Other. Specify	goods			
		— Strict. Specify				

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Rheannon Elisa Castrucci	Case number (if known)	
Alliance Healthcare	Last 4 digits of account number	\$110.00
Nonpriority Creditor's Name 2123 Auburn Avenue Cincinnati, OH 45219	When was the debt incurred? 2018	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical	
American Express	Last 4 digits of account number 1003	\$8,580.83
Nonpriority Creditor's Name P O Box 297814	When was the debt incurred? 2018	
FO Box 297814 Fort Lauderdale, FL 33329	When was the debt incurred? 2018	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Goods	
Nordstrom	Last 4 digits of account number 7649	\$1,933.00
Nonpriority Creditor's Name P O Box 13589	When was the debt incurred? 2019	
Scottsdale, AZ 85267-3589  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	no or and date you me, and disamine of one of an area apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other Specify Goods	

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1 Rheannon Elisa Castrucci	Case number (if know	wn)
Synchrony Bank (Gap)	Last 4 digits of account number 6590	\$963.03
Nonpriority Creditor's Name Attention: Bankruptcy Department P O Box 965060 Orlando, FL 32896	When was the debt incurred? 2018	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	<i>y</i>
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or d report as priority claims	ivorce that you did not
■ No	$\square$ Debts to pension or profit-sharing plans, and other sim	nilar debts
Yes	Other. Specify Goods	
Target Card Services Nonpriority Creditor's Name	Last 4 digits of account number 6232	\$2,162.18
PO Box 660170 Dallas, TX 75266	When was the debt incurred? 2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	У
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or d report as priority claims	•
■ No	Debts to pension or profit-sharing plans, and other sim	nilar debts
Yes	Other. Specify Goods	
UC Health	Last 4 digits of account number	\$479.44
Nonpriority Creditor's Name PO Box 630911 Cincinnati, OH 45263	When was the debt incurred? 2018-2019	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	y
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or d report as priority claims	ivorce that you did not
No	lacksquare Debts to pension or profit-sharing plans, and other sim	nilar debts
Yes	■ Other. Specify Medical	

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DCDIO	Kilealiiloii Elisa Castrucci		Case Humber (ii known)	
4.8	US Bank	Last 4 digits of account number	4793	\$18,623.93
	Nonpriority Creditor's Name			
	Retail Payment Solutions Department	When was the debt incurred?	2018	
	PO Box 5229			
	Cincinnati, OH 45201			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepreport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-shar	ng plans, and other similar debts	
	□Yes	Other. Specify Goods		
4.9	US Bank	Last 4 digits of account number	8853	\$16,342.85
	Nonpriority Creditor's Name			• •
	Retail Payment Solutions Department	When was the debt incurred?	2018	
	PO Box 5229			
	Cincinnati, OH 45201			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-shar	ng plans, and other similar debts	
	Yes	Other. Specify Goods		
Part 3:	List Others to Be Notified About a De	ebt That You Already Listed		
is tryi have	nis page only if you have others to be notified ing to collect from you for a debt you owe to s more than one creditor for any of the debts th ed for any debts in Parts 1 or 2, do not fill out	omeone else, list the original creditor i at you listed in Parts 1 or 2, list the add	n Parts 1 or 2, then list the collection agency	here. Similarly, if you
	and Address	On which entry in Part 1 or Part 2 did yo	_	
	n Financial ox 610		Part 1: Creditors with Priority Unsecured Clair	
_	Rapids, MN 56379		Part 2: Creditors with Nonpriority Unsecured	Claims
		Last 4 digits of account number		
	and Address	On which entry in Part 1 or Part 2 did yo		
	s Global Solutions LLC Glenroy Road #250	<del></del> ` ′	Part 1: Creditors with Priority Unsecured Clair	
	eapolis, MN 55439		Part 2: Creditors with Nonpriority Unsecured	Claims
	• ,	Last 4 digits of account number		
	and Address	On which entry in Part 1 or Part 2 did yo		
	ter & Associates PC		Part 1: Creditors with Priority Unsecured Clair	
	nuteman Road ver, MA 01810	ı	Part 2: Creditors with Nonpriority Unsecured	Claims
Alido	70., MA 01010	Last 4 digits of account number		

Part 4: Add the Amounts for Each Type of Unsecured Claim

Official Form 106 E/F

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Debtor 1 Rheannon Elisa Castrucci

Case number (if known)

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 49,885.78
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 49,885.78

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Fill in this infor							
Debtor 1	Pebtor 1 Rheannon Elisa Castrucci						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF OHIO				
Case number							
(if known)				☐ Check if this is an amended filing			

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	=
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	_
	•				

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		Docume	nı Page 26 C	)I 40	
Fill in this	information to identify your	case:			
Debtor 1	Dheennen Elice	Pastuussi			
Deptor 1	Rheannon Elisa (	Middle Name	Last Name		
Debtor 2					
(Spouse if, fili	ng) First Name	Middle Name	Last Name		
I Initad Cta	too Donkruntov Court for the	SOUTHERN DISTRICT	OE OHIO		
United Sta	ites Bankruptcy Court for the:	300 ITILKN DISTRICT	OF OFFICE		
Case num	ber				
(if known)					☐ Check if this is an
					amended filing
~ · ·	15 40011				
Officia	I Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
our name	and case number (if known)	. Answer every question			p of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No					
☐ Yes	5				
	hin the last 8 years, have you na, California, Idaho, Louisiana				ty states and territories include )
■ No.	Go to line 3.				
_	s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
	,	3	, , , , , , , , , , , , , , , , , , , ,		
in line Form	e 2 again as a codebtor only i	f that person is a guarar	tor or cosigner. Make	sure you have listed t	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor	ID Codo			editor to whom you owe the debt
	Name, Number, Street, City, State and Z	IF COUC		Check all schedul	еѕ глат арріу:
3.1				☐ Schedule D, lir	ne
	Name			□ Schedule E/F,	
				☐ Schedule G, lii	
=					
	Number Street City	State	ZIP Code		
	Oity	Giale	Zii Code		
3.2				☐ Schedule D, lir	10
	Name			Schedule E/F,	<del></del>
				☐ Schedule G, lii	
_					
	Number Street City	State	ZIP Code		
	Oity	CIGIO	ZIF COUC		

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	in this information t							
Dei	btor 1	Rneannon E	lisa Castrucci					
	btor 2 buse, if filing)							
Uni	ited States Bankrup	tcy Court for the	: SOUTHERN DISTRIC	CT OF OHIO				
Cas	se number				Ched	ck if this is:		
(If kr	nown)					An amende	d filing	
							nt showing po as of the follow	ostpetition chapter wing date:
<u>O</u>	fficial Form	106I			Ī	MM / DD/ Y	YYY	
S	chedule I:	Your Inc	ome					12/15
atta	ch a separate she	et to this form.		ith you, do not include informa ional pages, write your name a				
١.	information.	Oyment		Debtor 1		Debtor 2	or non-filing	spouse
	If you have more		Employment status	■ Employed		■ Emplo	yed	
	attach a separate information about employers.		Employment status	☐ Not employed	☐ Not er	mployed		
			Occupation	Staff Asst.				
	Include part-time, self-employed wo		Employer's name	UC				
	Occupation may i or homemaker, if		Employer's address	2600 Clifton Ave Cincinnati, OH 45221				
			How long employed t	here? 2 years				
Pai	rt 2: Give De	tails About Mor	nthly Income					
	imate monthly incouse unless you are		ate you file this form. If	you have nothing to report for an	y line, writ	e \$0 in the	space. Includ	e your non-filing
	ou or your non-filing e space, attach a se			ombine the information for all emp	oloyers for	that perso	n on the lines	below. If you need
					For De	btor 1	For Debtor	
2.			ry, and commissions (b calculate what the monthl		\$3	3,620.00	\$	0.00

Official Form 106l Schedule I: Your Income page 1

0.00

3,620.00

+\$

\$

0.00

0.00

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

Deb	otor 1	Rheannon Elisa Castrucci	_	Cas	se number (if kno	own)			
				F	or Debtor 1			ebtor 2 or illing spouse	
	Cop	by line 4 here	4.	\$	3,620	.00	\$	0.00	
5.	List	all payroll deductions:							
	5a. 5b. 5c. 5d. 5e. 5f. 5g.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues	5a. 5b. 5c. 5d. 5e. 5f. 5g.	\$ \$ \$	0 0 1,390 0	.00 .00 .00	\$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00	
	5h.	Other deductions. Specify:	5h.				+ \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,555	.00	\$	0.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,065	.00	\$	0.00	
8.	8b. 8c. 8d. 8e. 8f.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive  Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive  Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income	8c. 8d. 8e.	\$	1,240 0 0	.00 .00 .00 .00 .00	\$ \$ \$	0.00 0.00 0.00 0.00 0.00	
	8h.	Other monthly income. Specify:	8h.	+ \$			+ \$	0.00	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	1,240	.00	\$	0.00	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.		3,305.00	+ \$_		0.00 = \$	3,305.00
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your per friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not a cify:	depe					hedule J. 11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies							3,305.00
13.	Do y	you expect an increase or decrease within the year after you file this form.	?					Combine monthly	ed income
	1 1	Yes. Explain:							

Fill	in this informa	tion to identify yo	our case:			1					
	otor 1	Rheannon E		rucci		Chec	k if this is:				
		Kileailloli L	iisa oasi	iucci			An amended filing				
	otor 2 ouse, if filing)							wing postpetition chapter the following date:			
Unit	ed States Bankr	uptcy Court for the	: SOUTH	IERN DISTRICT OF OHIC	1	MM / DD / YYYY					
Cas	e number										
	nown)										
0	fficial Fo	rm 106J									
S	chedule	J: Your	Exper	nses				12/1			
Be	as complete a	and accurate as	possible eded, atta	. If two married people ar ich another sheet to this							
Par		ibe Your House	hold								
1.	Is this a joir										
	■ No. Go to		in a senar	ate household?							
	□ N		a copa.								
	☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses for Separate Household</i> of Debtor 2.										
2.	2. Do you have dependents? ☐ No										
	Do not list Do Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?			
	Do not state	the						□ No			
	dependents	names.			Daughter			■ Yes □ No			
					Daughter		12	■ Yes			
								□ No			
								☐ Yes			
								□ No □ Yes			
3.		enses include		No	-			<b>—</b> 100			
		f people other t d your depende		Yes							
Par		ate Your Ongoi		ly Fynansas							
Est	imate your ex	penses as of y	our bankr	uptcy filing date unless y y is filed. If this is a supp							
Inc	lude expense	s paid for with	non-cash	government assistance i	f you know						
the		n assistance an		cluded it on Schedule I: \			Your exp	enses			
4.		or home owners and any rent for th		ses for your residence. I or lot.	nclude first mortgag	e 4. \$	1,000.00				
	If not includ	led in line 4:									
	4a. Real e	state taxes				4a. \$		0.00			
	•	rty, homeowner's				4b. \$		0.00			
		maintenance, re owner's associat		upkeep expenses		4c. \$ 4d. \$		80.00 0.00			
5.				our residence, such as ho	me equity loans	4u. \$		0.00			

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Deptor	Kneanno	on Elisa Castrucci	Case num	ber (if known)	
6. <b>U</b>	tilities:				
6. <b>6</b>		heat, natural gas	6a.	\$	175.00
6k		wer, garbage collection	6b.	·	50.00
60		e, cell phone, Internet, satellite, and cable services	6c.		125.00
60	•		6d.		0.00
		ekeeping supplies	7.	\$	800.00
		children's education costs	8.	\$	40.00
_		ry, and dry cleaning	9.	·	160.00
	_	roducts and services	10.		
	•	ntal expenses	11.		80.00
		•	11.	Φ	50.00
	o not include c	Include gas, maintenance, bus or train fare.	12.	\$	120.00
		clubs, recreation, newspapers, magazines, and books	13.	·	50.00
		ributions and religious donations	14.	· ·	0.00
	surance.	ributions and religious donations	14.	Ψ	0.00
		surance deducted from your pay or included in lines 4 or 20.			
	5a. Life insura		15a.	\$	0.00
	5b. Health ins		15b.		0.00
	5c. Vehicle in		15c.	·	140.00
	5d. Other insu		15d.	· -	0.00
		iclude taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
	pecify:	icidue taxes deducted from your pay of incidued in lines 4 of 20.	16.	\$	0.00
	·	ease payments:		Ψ	0.00
		ents for Vehicle 1	17a.	\$	219.00
		ents for Vehicle 2	17b.	·	0.00
	c. Other. Sp.		17c.	·	0.00
	d. Other Sp		17d.	· ·	
		ਰਪਾy. of alimony, maintenance, and support that you did not report a		Φ	0.00
		your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00
		s you make to support others who do not live with you.	•	\$	0.00
	pecify:	you make to support outside that are not not all your	19.	<b>–</b>	0.00
		erty expenses not included in lines 4 or 5 of this form or on Sch		our Income.	
		s on other property	20a.		0.00
	0b. Real estat		20b.		0.00
		homeowner's, or renter's insurance	20c.		0.00
		nce, repair, and upkeep expenses	20d.	· -	0.00
		er's association or condominium dues	20a. 20e.		0.00
				·	
1. <b>O</b>	ther: Specify:	school expenses	21.	тф	200.00
2. <b>C</b>	alculate your	monthly expenses			
	2a. Add lines 4	•		\$	3,289.00
		2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
		a and 22b. The result is your monthly expenses.		\$	3,289.00
	-0. / too iii to ZZ	a and 110. The result to your menting expenses.			5,203.00
3. C	alculate your	monthly net income.			
23	Ba. Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	3,305.00
23	Bb. Copy your	monthly expenses from line 22c above.	23b.	-\$	3,289.00
23		our monthly expenses from your monthly income.			40.00
	The result	is your monthly net income.	23c.	\$	16.00
		an increase or decrease in your expenses within the year after y			aa ay daaraas - b :
		bu expect to finish paying for your car loan within the year or do you expect you terms of your mortgage?	ur mortgage p	payment to increas	se or decrease because of
_	_	terms or your mortgage:			
		[=			
	odification to the No.	terms of your mortgage?  Explain here:			

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Fill in this info	ormation to identify your	case:			
Debtor 1	Rheannon Elisa (				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
, ,					
United States	Bankruptcy Court for the:	SOUTHERN DISTRIC	T OF OHIO		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Fo	<u>rm 106Dec</u>				
Declara	ation About a	an Individua	l Debtor's So	chedules	12/15
If two married	people are filing together	r, both are equally response	onsible for supplying co	rrect information.	
You must file t	this form whenever you fi	ile hankruntov schedule	s or amended schedule	s Making a false state	ment, concealing property, or
					0, or imprisonment for up to 20
years, or both	. 18 U.S.C. §§ 152, 1341, 1	1519, and 3571.			
6	ian Balaw				
3	ign Below				
Did you	pay or agree to pay some	one who is NOT on atta	rnov to holp you fill out	hankruntau farma?	
Dia you	pay or agree to pay some	one who is NOT an allo	rney to help you fill out	Dankrupicy forms?	
■ No					
<b>-</b>				A., 1. D. 1	
☐ Yes	. Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
				Boolaration,	and dignature (Gillolai i Gilli 110)
	nalty of perjury, I declare	that I have read the sun	nmary and schedules file	ed with this declaratio	n and
that they	are true and correct.				
X /s/ R	heannon Elisa Castruc	cci	X		
	annon Elisa Castrucci		Signature o	f Debtor 2	
Signa	ature of Debtor 1				
Date	May 2, 2019		Date		
Date	IVIAY 4, 4013				

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Filli	n this inform	ation to identify you	r case:			
Debt		Rheannon Elisa	_			
		First Name	Middle Name	Last Name		
Debt (Spou	tor 2 se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bar	kruptcy Court for the:	SOUTHERN DISTRICT (	OF OHIO		
		, ,				
(if kno	e number wn)				_	Check if this is an amended filing
Sta Be as	s complete a	of Financial		re filing together, both are	ankruptcy equally responsible for sup	
		). Answer every ques		uns form. On the top of any	y additional pages, write you	ui ilaille alla case
Part			rital Status and Where You	Lived Before		
١.	What is your	current marital statu	IS?			
	<ul><li>■ Married</li><li>■ Not marr</li></ul>	ried				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territor ico, Texas, Washington and V	
	■ No □ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	ificial Form 106H).		
Part	2 Explain	the Sources of You	r Income			
	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	the date you tiled for hankruntey:		■ Wages, commissions, bonuses, tips	\$10,100.70	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1	Rheannon Elisa Castrucci	Doddinent	i age o	Case number (if known)	

				Debtor 1			Debtor 2			
				Sources of income Check all that apply.		income e deductions and ons)	Sources of Check all th		Gross income (before deductions and exclusions)	
	r last calen nuary 1 to	dar year: December 3	31, 2018 )	■ Wages, commissions, bonuses, tips		\$30,229.00		☐ Wages, commissions, bonuses, tips		
				☐ Operating a business	Operating a business		☐ Operatin	g a business		
		dar year bef December 3		■ Wages, commissions, bonuses, tips		\$26,676.00	☐ Wages, bonuses, tip	commissions,		
				☐ Operating a business			☐ Operatin	g a business		
	winnings.  List each s	lf you are filin	ng a joint cas	pensions; rental income; interse and you have income that youne from each source separate	you receiv	ed together, list it	only once unde	r Debtor 1.	d gambling and lottery	
	☐ Yes.	riii in the de	talis.							
				Debtor 1 Sources of income Describe below.	each s	deductions and	Debtor 2 Sources of Describe be		Gross income (before deductions and exclusions)	
Pai	rt 3: List	Certain Pay	ments You	Made Before You Filed for	Bankrupt	су				
6.	□ No.	Neither De individual puring the No. Yes	btor 1 nor E rimarily for a 90 days befor Go to line 7 List below e paid that cr not include o adjustmen r Debtor 2 c 90 days befor Go to line 7 List below e	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the ton 4/01/22 and every 3 years or both have primarily consulate you filed for bankruptcy, di	umer debt id you pay id a total o nts for don his bankru is after tha umer debt id you pay	any creditor a tot  f \$6,825* or more nestic support obli ptcy case. t for cases filed or  s. any creditor a tot	al of \$6,825* or in one or more igations, such a n or after the datal of \$600 or mond the total amo	more?  payments and to so child support and te of adjustment ore?	the total amount you and alimony. Also, do t.	
			attorney for	this bankruptcy case.	onyalions,	Sucii as cilliu su	oport and animol			
	Creditor'	s Name and	Address	Dates of payme	ent	Total amount paid	Amount yo still ow		payment for	

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Dei	Rneannon Elisa Castrucci		Cas	se number (# known)			
7.	Within 1 year before you filed for bankrup <i>Insiders</i> include your relatives; any general p of which you are an officer, director, person i a business you operate as a sole proprietor. alimony.	artners; relatives of any ger n control, or owner of 20% of	neral partners; partners partners or more of their voting	erships of which yog g securities; and a	ou are a general ny managing ag	partner; corporation ent, including one fo	
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider.</li></ul>						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment	
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		ments or transfer a	any property on a	ccount of a del	ot that benefited an	
	☐ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	• •	
Par	rt 4: Identify Legal Actions, Repossessic	ons, and Foreclosures					
9.	Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes.  No Yes. Fill in the details.						
	Case title Case number	Nature of the case	Court or agency		Status of the	case	
	US Bank v. Debtor A1900147	Suit for money	Suit for money H.C. Common Pleas			■ Pending □ On appeal □ Concluded	
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details below.  No. Go to line 11.		erty repossessed, f	oreclosed, garnis	shed, attached,	seized, or levied?	
	☐ Yes. Fill in the information below.						
	Creditor Name and Address	Describe the Property		Date		Value of the property	
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment be  No Yes. Fill in the details.			nancial institution	n, set off any ar	nounts from your	
	Creditor Name and Address	Describe the action the	e creditor took		action was	Amount	
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or		erty in the possess	taker		it of creditors, a	

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Del		n Elisa Castrucci		Document	Page 35 of	46 Case number (		SC Main
Do	. Franklint Contain	Oitte and Cantaibuti						
		Gifts and Contribution					•	_
13.	Within 2 years be	fore you filed for ban	kruptcy, d	id you give any g	jifts with a total v	alue of more th	an \$600 per person	?
	_ 110	e details for each gift.						
		value of more than \$	600	Describe the gi	fts		Dates you gave the gifts	Value
	Person to Whom Address:	You Gave the Gift ar	nd					
14.	■ No	fore you filed for ban			jifts or contribution	ons with a total	value of more than	\$600 to any charity?
		e details for each gift or			-		_	
	more than \$600 Charity's Name	·		Describe what y	you contributed		Dates you contributed	Value
	Address (Number,	Street, City, State and ZIP Co	ode)					
Par	t 6: List Certain	Losses						
15.	or gambling?  No	ore you filed for bank	ruptcy or	since you filed fo	r bankruptcy, did	you lose anyth	ning because of thef	t, fire, other disaster
	Yes. Fill in th							
	Describe the pro	perty you lost and curred		•	coverage for the		Date of your loss	Value of property lost
				e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.				
Dat	t 7: List Certain	Payments or Transfe	are					
16.	Within 1 year before	ore you filed for bank seeking bankruptcy o eys, bankruptcy petition	ruptcy, die	g a bankruptcy p	etition?	. ,	,, ,	rty to anyone you
	Person Who Was Address Email or website Person Who Mad		t You	Description and transferred	l value of any pro	perty	Date payment or transfer was made	Amount of payment
	Goering & Goe 220 West Third Cincinnati, OH Father	Street		Attorney Fees	•		5/1/19	\$1,505.00
17.	promised to help	ore you filed for bank you deal with your cr payment or transfer th	editors or	to make páymer			r transfer any prope	rty to anyone who

 $\ \square$  Yes. Fill in the details.

Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made

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Debtor 1 Rheannon Elisa Castrucci

Case number (if known)

18.	Within 2 years before you filed for bankruptor transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already  No	siness or financial affa de as security (such as the	i <b>irs?</b> he granting of a s						
	☐ Yes. Fill in the details.								
	Person Who Received Transfer Address	Description and vo		payme	be any property or ents received or debts n exchange	Date transfer was made	;		
	Person's relationship to you				<b>.</b>				
19.	Within 10 years before you filed for bankrupte beneficiary? (These are often called asset-proteins)		y property to a s	self-settled	d trust or similar device	of which you are a			
	No Yes. Fill in the details.								
	Name of trust	Description and v	alue of the prop	ertv trans	ferred	Date Transfer wa	s		
				,		made			
Par	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Sto	rage Units	S				
20	Within 1 year before you filed for bankruptov	were ony financial co	acunta ar inatru	ımanta hal	d in your name, or for w	our bonefit alocad			
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred?	, were any miancial act	counts or mstru	illients nei	d in your name, or for yo	our benefit, closed,			
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.								
	No Yes. Fill in the details.								
		Last 4 digits of	Type of accou	nt or	Date account was	Last balanc	е		
		account number	instrument		closed, sold, moved, or transferred	before closing of transfe	r		
21. Do you now have, or did you have within 1 year before you filed for bankruptcy, an cash, or other valuables?				y safe dep	osit box or other depos	itory for securities,			
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St State and ZIP Code)		Describe (	the contents	Do you still have it?			
22.	Have you stored property in a storage unit or	place other than your	home within 1 y	year befor	e you filed for bankrupto	cy?			
	■ No								
	Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe t	the contents	Do you still have it?			
D	Libert'i Comment of Very Held on Comment								
Par	t 9: Identify Property You Hold or Control fo	or Someone Else							
23.	Do you hold or control any property that som for someone.	eone else owns? Inclu	ide any property	y you borr	owed from, are storing f	for, or hold in trust			
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		Describe t	the property	Valu	е		
Par	t 10: Give Details About Environmental Infor	mation							
Eo = 1	the purpose of Bort 10, the following definition								

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107

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Debtor 1 Rheannon Elisa Castrucci

Case number (if known)

	toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
		means any location, facility, or propert	-	-	law,	whether you now own, operate,	or utilize it or used	
		ardous material, pollutant, contaminant				, <u>-</u>	<b></b>	
Rep	ort a	II notices, releases, and proceedings th	nat y	ou know about, regardless of when	the	ey occurred.		
24.	Has	any governmental unit notified you that	at yo	ou may be liable or potentially liable	unc	der or in violation of an environm	ental law?	
		No						
	Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice	
25.	Hav	e you notified any governmental unit of	f any	y release of hazardous material?				
	■ No □ Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice	
26.	Hav	e you been a party in any judicial or ad	mini	istrative proceeding under any envi	roni	mental law? Include settlements	and orders.	
		N-						
		No Yes. Fill in the details.						
	Ca	se Title		Court or agency	Na	ture of the case	Status of the	
	Ca	se Number		Name Address (Number, Street, City, State and ZIP Code)			case	
Par	t 11:	Give Details About Your Business or	Cor	nnections to Any Business				
27.	Witl	nin 4 years before you filed for bankrup	tcy,	did you own a business or have an	y of	the following connections to an	y business?	
		☐ A sole proprietor or self-employed	in a	trade, profession, or other activity,	eith	er full-time or part-time		
		☐ A member of a limited liability com	pany	y (LLC) or limited liability partnershi	ip (L	LP)		
	☐ A partner in a partnership							
		☐ An officer, director, or managing ex	kecu	itive of a corporation				
		☐ An owner of at least 5% of the votin	ng o	r equity securities of a corporation				
		No. None of the above applies. Go to	Part	: <b>12</b> .				
		Yes. Check all that apply above and fil	II in 1	the details below for each business	<b>S</b> .			
		siness Name	De	escribe the nature of the business		Employer Identification number		
		dress mber, Street, City, State and ZIP Code)	Na	ame of accountant or bookkeeper		Do not include Social Security  Dates business existed	number or ITIN.	
28.		nin 2 years before you filed for bankrup itutions, creditors, or other parties.	tcy,	did you give a financial statement t	to ar	nyone about your business? Incl	ude all financial	
		No Yes. Fill in the details below.						
	— Na		Da	ate Issued				
		dress nber, Street, City, State and ZIP Code)						

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Case number (if known) Debtor 1 Rheannon Elisa Castrucci Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Rheannon Elisa Castrucci Signature of Debtor 2 Rheannon Elisa Castrucci Signature of Debtor 1 Date Date May 2, 2019 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Southern District of Ohio

In re	Rheannon Elisa Castrucci		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTOI	RNEY FOR DI	EBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for services	
	For legal services, I have agreed to accept		\$	1,505.00	
	Prior to the filing of this statement I have received		\$	1,505.00	
	Balance Due			0.00	
2.	\$ 335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	☐ Debtor ■ Other (specify): Father				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are mem	bers and associates	of my law firm.
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name				law firm. A
6.	In return for the above-disclosed fee, I have agreed to re-	nder legal service for all aspect	s of the bankruptcy	case, including:	
	<ul><li>a. Analysis of the debtor's financial situation, and render</li><li>b. Preparation and filing of any petition, schedules, state</li><li>c. Representation of the debtor at the meeting of creditor</li><li>d. [Other provisions as needed]</li></ul>	ement of affairs and plan which	may be required;	-	kruptcy;
7.	By agreement with the debtor(s), the above-disclosed fee Any adversary proceeding, redemption I but not limited to Credit Bureau work an	itigation, real estate work,	or other non-ban	kruptcy services	including
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any pankruptcy proceeding.	agreement or arrangement for	payment to me for r	epresentation of the	debtor(s) in
N	May 2, 2019	/s/ Eric W. Goerir	ng		
_	Date	Eric W. Goering			
		Signature of Attorne Goering & Goerir			
		220 West Third S			
		Cincinnati, OH 45	5202		
		(513) 621-0912 Name of law firm			
		rume oj iuw jimi			

Fill in this in	nformation to identify your case:				irected in this form and	in Form
Debtor 1	Rheannon Elisa Castrucci		122A-15	supp:		
Debtor 2 (Spouse, if filin			■ 1.	There is no pres	umption of abuse	
United Stat	tes Bankruptcy Court for the: Southern District	of Ohio	□ 2. ·		o determine if a presul nade under <i>Chapter</i> 7	•
Case numb	per				icial Form 122A-2).	
(if known)			□ 3.		does not apply now be service but it could ap	
			□ C	heck if this is a	n amended filing	
Official	l Form 122A - 1					
Chapte	er 7 Statement of Your Cu	rrent Monthly	Incom	e		12/1
attach a sep case number qualifying m	ete and accurate as possible. If two married people arate sheet to this form. Include the line number to very fifth of the control of the con	which the additional inform om a presumption of abuse ption from Presumption of	ation applies because yo	s. On the top of a	ny additional pages, wri narily consumer debts o	te your name and or because of
	ot married. Fill out Column A, lines 2-11.					
	arried and your spouse is filing with you. Fi∥ o					
	arried and your spouse is NOT filing with you.	-				
	Living in the same household and are not lega	•		,		
	Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evadi	legally separated under n	onbankrupt	cy law that appli	es or that you and you	
101(10A) the 6 mor	e average monthly income that you received from all . For example, if you are filing on September 15, the 6-n hths, add the income for all 6 months and divide the tota own the same rental property, put the income from that	nonth period would be March I by 6. Fill in the result. Do no	1 through Au ot include any	igust 31. If the amo income amount m	ount of your monthly incor ore than once. For examp	ne varied during ole, if both
			Colu Deb	mn A tor 1	Column B Debtor 2 or non-filing spouse	
	gross wages, salary, tips, bonuses, overtime, Il deductions).	and commissions (befo	ore all \$	4,229.07	\$	
	ony and maintenance payments. Do not include nn B is filled in.	payments from a spouse	e if \$	1,236.67	\$	
of you from a and ro	nounts from any source which are regularly puor your dependents, including child support an unmarried partner, members of your householoommates. Include regular contributions from a sponder. Do not include payments you listed on line 3.	t. Include regular contribu d, your dependents, pare	tions nts,	0.00	\$	
	ncome from operating a business, profession,	or farm				
		Debtor 1				
	s receipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>				
	ary and necessary operating expenses northly income from a business, profession, or far	0.00	ere -> \$	0.00	\$	
	ncome from rental and other real property	Шф	- · · · · · · · · · · · · · · · · · · ·			
0. 1.01.11	and the property	Debtor 1				
Gross	receipts (before all deductions)	\$0.00				
Ordina	ary and necessary operating expenses	-\$ 0.00				
Net m	nonthly income from rental or other real property	\$0.00 Copy h		0.00	\$	
7. Intere	est, dividends, and royalties		\$	0.00	\$	

Official Form 122A-1

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				Column A Debtor 1		Column B Debtor 2 or non-filing s		
. Unemployment co	mpensation			\$	0.00	\$		
Do not enter the am the Social Security	ount if you contend that the ar Act. Instead, list it here:	nount received was a be	enefit unde	er				-
For you		\$	0.00					
For your spouse		\$						
Pension or retirem benefit under the So	ent income. Do not include a pocial Security Act.	ny amount received that	was a	\$	0.00	\$		_
Do not include any li received as a victim	her sources not listed above benefits received under the So of a war crime, a crime agains If necessary, list other sources	cial Security Act or payr st humanity, or internation	ments onal or	0		0		
•				\$	0.00	\$		-
Total access	unto from congrete names "f ==			\$	0.00	\$ \$		-
rotai amot	unts from separate pages, if an	y.		- \$	0.00			-
	al current monthly income. A add the total for Column A to t		r \$	5,465.74	+		= \$_	5,465.7
							Tota	current mon
· ·	rent monthly income for the I current monthly income from	•		Сор	y line 11	nere=>	\$	5,465.7
Multiply by 12	(the number of months in a yea	ar)					X	12
12b. The result is yo	our annual income for this part	of the form				12b.	\$	65,588.8
3. Calculate the medi	ian family income that applie	s to you. Follow these s	steps:					
Fill in the state in wh	nich you live.	ОН						
Fill in the number of	people in your household.	3						
To find a list of appl	mily income for your state and icable median income amount at may also be available at the	s, go online using the lin	•	d in the separ	ate instruc	13. tions	\$	74,969.0
4. How do the lines c	•	bankruptcy cierk's office	·					
_	2b is less than or equal to line	13. On the top of page 1	, check bo	x 1, There is	no presun	nption of abuse	ə.	
	2b is more than line 13. On the		x 2, The p	resumption o	f abuse is	determined by	Form	122A-2.
	Part 3 and fill out Form 122A-2							
Sign Below	o I doctoro undor populty of pe	orium that the informatio	n on this s	tatement and	in any att	achmonte is tr	uo and	correct
	e, I declare under penalty of pe	arjury mai me miomiatio	ii oii tiiis S	iaiemeni ano	iii aliy atti	auments is tr	u <del>e</del> dilû	correct.
X /s/ Rheanr	non Elisa Castrucci							
	Elisa Castrucci							
	Elisa Castrucci							

Official Form 122A-1

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$24	45	filing fee	-
\$7	75	administrative fee	
+ \$1	5	trustee surcharge	
\$33	35	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Affirm (Realreal) 225 Bush Street San Francisco CA 94104

Alliance Healthcare 2123 Auburn Avenue Cincinnati OH 45219

Alltran Financial PO Box 610 Sauk Rapids MN 56379

American Express P O Box 297814 Fort Lauderdale FL 33329

Guardian Savings 5901 Colerain Ave Cincinnati OH 45239

Huntington Bank 2361 Morse Rd Columbus OH 43229

Nordstrom P O Box 13589 Scottsdale AZ 85267-3589

Radius Global Solutions LLC 7831 Glenroy Road #250 Minneapolis MN 55439

Synchrony Bank (Gap)
Attention: Bankruptcy Department
P O Box 965060
Orlando FL 32896

Target Card Services PO Box 660170 Dallas TX 75266

UC Health PO Box 630911 Cincinnati OH 45263

US Bank Retail Payment Solutions Department PO Box 5229 Cincinnati OH 45201

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